



STATE OF TENNESSEE  
DEPARTMENT OF COMMERCE & INSURANCE  
FUNERAL BOARD AND BURIAL SERVICES  
500 James Robertson Parkway, Second Floor  
Nashville, TN 37243-1145  
(615) 741-5062 Office  
(615) 532- 1903 Fax

**CERTIFICATION FOR TENNESSEE LICENSE**

This is to certify that \_\_\_\_\_

SSN: \_\_\_\_\_, DOB: \_\_\_\_\_, under the laws of the State of

\_\_\_\_\_ was issued Funeral Director License No. \_\_\_\_\_,

expiration date \_\_\_\_\_, and Embalmers License No. \_\_\_\_\_, expiration date \_\_\_\_\_, on

(date) \_\_\_\_\_ by examination, with a score of \_\_\_\_\_ on the Funeral Directors Examination

and \_\_\_\_\_ on the Embalmer Examination.

The type of examination administered was the \_\_\_\_\_ National Exam or the \_\_\_\_\_ State exam.

- |   |       |       |
|---|-------|-------|
| (a) The licensee is in good standing      | ? Yes | ? 1 R |
| (b) The licensee has been disciplined*    | ? Yes | ? 1 R |
| (c) The licensee has complaints pending * | ? Yes | ? 1 R |
| (d) The licensee owes fees to the Board * | ? Yes | ? 1 R |

\* Documentation must be provided for any "Yes" answered above.

(Affix State Seal here)

\_\_\_\_\_  
Signature of Director/Administrator

\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
Title

For: \_\_\_\_\_

(Title of Board)